

STATE OF SOUTH DAKOTA)
)SS:
COUNTY OF _____)

IN CIRCUIT COURT
_____ JUDICIAL CIRCUIT

In the Matter of the Petition regarding)
)
)
_____)
(Birth Certificate Name), A Minor Child.)
)
For a Change of Name to)
)
_____)
(Proposed Name))

CIV. _____

AFFIDAVIT OF SERVICE

I, _____, being sworn, state that on
(Name of person who mailed documents)

_____, 20_____, I served the following papers:

(List all papers mailed to the other party; i.e. A copy of the Verified Petition for Name Change of a Minor Child
and a file-stamped copy of the Notice of Hearing for Name Change of a Minor Child)

by placing true copies of the documents in an envelope addressed to:

_____ at _____
(Name of other parent) (Other parent's address)

in the City of _____, State of _____,

Zip Code _____ and depositing the envelope, with sufficient postage, in the

United States Mail at _____.
(Place mailed from)

Dated this _____ day of _____, 20_____.

Signature of Person Who Mailed Documents
(Sign only in front of a notary or Clerk of Court)

Sworn/affirmed before me this
_____ day of _____, 20_____.

Name: (Printed)_____

(Notary Public/Clerk of Court)

Address:_____

If notary, my commission expires
(SEAL)

City/State/Zip:_____

Telephone: (____)_____